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PTO/SB/01 (6-95)

Approved for use through: 10/31/98 OMB 0651-0032

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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing	0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	H 3933 PCT/US
			First Named Inventor	Akram, Mustafa
	COMPLETE IF KNOWN			
			Application Number	
			Filing Date	
			Group Art Unit	
			Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PHOSPHATE-TYPE TENSIDES COMBINED WITH HAIR CONDITIONING AGENTS IN HAIR COLOURING COMPOSITIONS**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 03/22/2000 as United States Application Number or PCT International

Application Number PCT/EP00/02538 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
199 14 927.5	Germany	04/01/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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H 3933 PCT/US

## DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP00/02538	03/22/2000	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name  Customer Number  or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke	21,062		
Glenn E. J. Murphy	33,539		
Stephen D. Harper	33,243		
Kimberly R. Hild	39,224		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number ☐ or label  OR ☐ Fill in correspondence address below

Name	Kimberly R. Hild						
Address	Henkel Corporation						
Address	2500 Renaissance Blvd, Suite 200						
City	Gulph Mills			State	PA	Zip	19406
Country	USA	Telephone	610-278-4964		Fax	610-278-6548	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Mustafa	Middle Initial		Family Name	Akram	Suffix e.g. Jr.	
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Inventor's Signature		Date	
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Residence: City	Hamburg	State		Country	Germany	Citizenship	Germany
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Post Office Address	Zylinderbergstr. 14						
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Post Office Address							
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City	22457 Hamburg	State		Zip		Country	Germany	Applicant Authority	
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet							
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Wolfgang				Middle Initial			Family Name	Wolff			Suffix e.g. Jr.					
Inventor's Signature									Date								
Residence: City		Bargteheide			State				Country		Germany		Citizenship		Germany		
Post Office Address		Neue Strasse 36															
Post Office Address																	
City	22941 Bargteheide			State				Zip			Country		Germany		Applicant Authority		
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name	Sandra				Middle Initial			Family Name	Rohweder			Suffix e.g. Jr.					
Inventor's Signature									Date								
Residence: City		Hamburg			State				Country		Germany		Citizenship		Germany		
Post Office Address		Daimlerwiete 3															
Post Office Address																	
City	22763 Hamburg			State				Zip			Country		Germany		Applicant Authority		
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name					Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature									Date								
Residence: City					State				Country				Citizenship				
Post Office Address																	
Post Office Address																	
City				State				Zip			Country				Applicant Authority		
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name					Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature									Date								
Residence: City					State				Country				Citizenship				
Post Office Address																	
Post Office Address																	
City				State				Zip			Country				Applicant Authority		
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name					Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature									Date								
Residence: City					State				Country				Citizenship				
Post Office Address																	
Post Office Address																	
City				State				Zip			Country				Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																	